



**SALEM, SOUTH DAKOTA
VARIANCE APPLICATION
CITY COUNCIL – BOARD OF ADJUSTMENT**

Name of Applicant: _____

Mailing Address of Applicant: _____

City, State, Zip _____

Phone: _____ E-mail: _____ Date: _____

Property Address: _____

Legal Address: _____

Parcel # _____ Present Zoning: _____

Description of Project: _____

Explain you reason for variance request: _____

Application shall be accompanied by:

- A copy of the site plan
- A non-refundable Variance Application Fee of \$30.00

I hereby certify that the information I have provided is accurate and correct and understand until application, site plan and fee are received no action will be taken.

Applicant's Signature

Date

FOR CITY USE ONLY

Date Received: _____

Board of Adjustment Meeting: _____ Time: _____

Date Published: _____ Posting Date (Property & City Hall): _____

Landowner Notice Sent: _____

Action Taken: _____

City Use Continued...

Comments: _____
